

CITY OF DETROIT
FINANCE DEPARTMENT
INCOME TAX
2 WOODWARD AVE. ROOM 512
DETROIT, MICHIGAN 48226-3456

1999

EMPLOYER'S MONTHLY RETURN
FOR
DETROIT INCOME TAX WITHHELD

D941 / 501
ENCLOSED: 12 VOUCHERS
INSTRUCTIONS
SUMMARY & ADDRESS VOUCHERS

DO NOT DESTROY

INSTRUCTIONS FOR D941/501

A monthly payment of Detroit income tax withheld is required for each month in which the amount withheld exceeds \$ 1 00.00. Payment is due on or before the last day of the month following the period in which the taxes were withheld.

For vouchers 1, 2, 4, 5, 7, 8, 10, and 11 fill in information requested. For vouchers 3, 6, 9, and 12 see instructions below.

A quarterly payment is allowed when the amount withheld does not exceed \$1 00.00 per month. Payment of withholding on a quarterly basis is due on or before the last day of the month following the quarter in which the taxes were withheld.

The payment form for the 3rd month of every quarter serves to reconcile the entire quarterly activity.

Lines 1, 2, & 3 reflect the amount of taxes withheld for each month of the period.

Line A reflects the total tax withheld for the quarter.

Lines 5 & 6, if applicable see below.

Line 7 to subtract payments made on a monthly basis.

Line 8 is amount to be paid with this return.

Note: This form must be filed. If you have not withheld during the quarter, you must file a return with the notation "None" on line 8.

Checks should be made payable to "Treasurer, City of Detroit" and mailed to: Treasurer, City of Detroit, Income Tax, P.O. Box 67000, Detroit, Michigan 48267-1319.

Adjustment of income Tax Withheld Lines 5 & 6 are used to correct errors made on prior returns for the current calendar year. DO NOT MAKE ADJUSTMENTS FOR UNDER COLLECTIONS OR OVER COLLECTIONS APPLICABLE TO A PRIOR YEAR. CONSULT THE INCOME TAX DIVISION BY CALLING 224-3332.

Employer I.D. #-Your Federal Employer Identification Number is used by the City of Detroit and is printed on your Form D941/501. If a new employer has not received a Federal Identification Number, the City will assign a temporary number. This will be in effect until the Federal number is assigned. A Federal Identification Number may be obtained from any Internal Revenue district office by filing Form SS-4. IN NO CASE SHOULD AN EMPLOYER USE A NUMBER ASSIGNED TO A PRIOR OWNER.

Correcting Preprinted Data-if your payment is for a different period than indicated or employer identification number is incorrect, the necessary corrections should be made on the face of the form. Address changes may be made on the separate address change voucher.

Final Return-If you do not expect to pay wages subject to tax in the future you must file a "Final Return" and answer the applicable questions on the reverse side of form D-941/501. Complete forms W-2, Withholding Tax Statement, and DW-3, Reconciliation of Income Tax Withheld, and mail within 30 days to Treasurer, City of Detroit Income Tax, P.O. Box 67000, Detroit, Michigan ,48267-1319.

Sale or Transfer of Business - If a business is sold or transferred, each employer must file a separate return. Neither employer should report wages paid by the other employer.

If a statutory merger or consolidation occurs, the continuing corporation will file in the same manner as it does for Federal withholding.

NOTES

SUMMARY

LIST PAYMENTS MADE WITH FORM D9,41/501

JANUARY	\$	
FEBRUARY		
MARCH		

QUARTER ENDED MAR. 31 \$ _____

APRIL	\$	
MAY		
JUNE		

QUARTER ENDED JUNE 30 \$ _____

JULY	\$	
AUGUST		
SEPTEMBER		

QUARTER ENDED SEPT. 30 \$ _____

OCTOBER	\$	
NOVEMBER		
DECEMBER		

QUARTER ENDED DEC. 31 \$ _____

TOTAL PAID \$ _____

DETROIT INCOME
TAX WITHHELD
D941/501

MAKE CHECK
& MAIL TO

TREASURER CITY OF DETROIT
INCOME TAX
P.O. BOX 67000

DETROIT, MICHIGAN 48267-1319

NOTE: NAME & COMPLETE ADDRESS REQUIRED

AMOUNT WITHHELD

I ST MONTH THIS QTR. *

PERIOD

DUE ON

IDENTIFICATION NO.

☐ IF FINAL RETURN CHECK HERE AND
COMPLETE QUESTIONS ON THE REVERSE SIDE.

1

SIGNATURE

TITLE

DATE

AMOUNT
DUE *

8

1. Last pay period in which Detroit Taxes were

withheld: _____

2. Check reason for "Final Return" and answer applicable questions:

☐ Business permanently discontinued.

☐ Business temporarily discontinued.

Operations will be resumed on

(Date) _____

☐ Still operating - Ceased paying wages.

Wages will be paid starting

(Date) _____

☐ Business sold to:

Name _____

Street _____

city _____

☐ Moved out of Detroit

3. Your current address:

Street _____

city _____

4. ☐ Other: _____

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	AMOUNT WITHHELD	
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	AMOUNT WITHHELD	
3	3RD MONTH THIS QTR *.	
	TOTAL TAX WITHHELD	
4	THIS QUARTER *	
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	ADJUSTED TAX	
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